

Division of Health Care Facilities

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: TN8307	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 02 - STATE BUILDING B. WING: _____	(X3) DATE SURVEY COMPLETED 04/17/2017
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

WESTMORELAND CARE & REHAB CTR

1559 NEW HIGHWAY 52

WESTMORELAND, TN 37186

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
N 831	<p>1200-8-6-.08 (1) Building Standards</p> <p>(1) A nursing home shall construct, arrange, and maintain the condition of the physical plant and the overall nursing home environment in such a manner that the safety and well-being of the residents are assured.</p> <p>This Rule is not met as evidenced by: Based on observations, the facility failed to maintain the physical plant.</p> <p>The finding included:</p> <p>Observation on 4/18/17 at 11:49 AM, revealed a six (6) inch ceiling penetration with two (2) inch pvc pipes penetrating the rated ceiling with an unapproved fire stop material (plumbers foam). National Fire Protection Association (NFPA) 101, 8.5 (2012 Edition)</p> <p>The maintenance director was present when this deficiency was identified and it was later acknowledged by the administrator during the exit conference on 4/18/17.</p>	N 831	<p>N831 1200-8-6-.08 (1) Building Standards</p> <p>Corrective Action for Residents Affected: The Maintenance Director will install approved fire stop around PVC pipe and sleeve going through rated smoke barrier ceiling to resist the passage of smoke into attic space above furnace room by 5/22/17.</p> <p>Potential Residents Affected: All residents have the potential to be affected. The Maintenance Director and Maintenance Assistant audited all mechanical spaces for open penetrations through rated smoke barrier ceilings.</p> <p>Systematic Measures: On 5/4/17, the Maintenance Director was in-serviced by the Maintenance Regional Director on proper fire stopping penetrations through rated walls and ceilings. Maintenance Director became certified in 3M Fire Stopping products and will audit weekly for open penetrations through rated walls and ceilings.</p> <p>Monitoring Changes: The Maintenance Director will provide results and discuss monthly for three month audits to the Facility's Quality Assurance Performance Improvement Committee for recommendations in further follow up as needed to show substantial compliance with the Code.</p>	5/30/17
N 848	<p>1200-8-6-.08 (18) Building Standards</p> <p>(18) It shall be demonstrated through the submission of plans and specifications that in each nursing home a negative air pressure shall be maintained in the soiled utility area, toilet room, janitor's closet, dishwashing and other such soiled spaces, and a positive air pressure shall be maintained in all clean areas including, but not limited to, clean linen rooms and clean utility rooms.</p>	N 848	<p>N848 1200-8-6-.08 (18) Building Standards</p> <p>Corrective Action for Residents Affected: On 4/20/17, the Maintenance Director repaired exhaust fan servicing 300 Hall Janitor's closet and repaired the HVAC supply to Linen closet on 300 Hall.</p> <p>Potential Residents Affected: All residents have the potential to be affected. On 5/11/17, the Maintenance Director and/or Maintenance Assistant audited all exhaust fans for proper operation, and checked clean linen rooms for operational HVAC supplies.</p> <p>Systematic Measures: On 5/4/17, the Maintenance Director was in-</p>	5/30/17

Division of Health Care Facilities

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

RECEIVED

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If continuation sheet 1 of 2

MAY 10 2017

Health Care Facilities

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NAME OF PROVIDER OR SUPPLIER WESTMORELAND CARE & REHAB CTR	STREET ADDRESS, CITY, STATE, ZIP CODE 1559 NEW HIGHWAY 52 WESTMORELAND, TN 37186
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N 848	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on observations, the facility failed to maintain the correct air flow in the required areas.</p> <p>The findings included:</p> <ol style="list-style-type: none"> 1. Observation on 4/18/17 at 10:34 AM, revealed the 300 hall janitors closet did not have negative air flow. 2. Observation on 4/18/17 at 10:35 AM, revealed the 300 hall clean linen room did not have a supply of clean air. <p>The maintenance director was present when these deficiencies were identified and they were later acknowledged by the administrator during the exit conference on 4/18/17.</p>	N 848	<p>served by the Maintenance Regional Director on checking and maintaining HVAC systems. The Maintenance Director shall audit exhaust fans and supply air to clean linen closets weekly for one month for proper operation, then monthly thereafter.</p> <p>Monitoring Changes: The Maintenance Director will provide results and discuss exhaust fans and supply air to clean linen closet audits to the Facility's Quality Assurance Performance Improvement Committee for recommendations with further follow up as needed to show substantial compliance with the Code.</p>	

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